

Work Order ID 110639

110639

Page 1

January-07-14 1:12:42 PM

Item ID: 646.3718 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Custom Washer
 Start Date: 1/07/14 Start Qty: 20.00 ***20*** Cust Item ID:
 Required Date: 1/17/14 Req'd Qty: 20.00 ***20*** Customer:
 Reference:

Approvals: Process Plan: AD m3 Date: 14/01/07 Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

| Draw Nbr | Revision Nbr |
|----------|--------------|
| 646.3700 | A |

110 0.00
110
 Waterjet Memo 0.00
 FLOW CNC Waterjet
 1-Cut as per Dwg
 Dwg Rev: A
 Prog Rev: A
 2-Deburr if necessary

50 A 14-1-29

120 0.00
120
 QC Memo 0.00
 Quality Control

50 A 14-1-29

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

| | | | | | | | | | | | | | | | | | | |
|--|--|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
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| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Design | | | | | | | | | |
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Handling/Pre | | | | | | | | | |
| Material | | | | | | | | | |
| Operator | | | | | | | | | |
| Offset/Setup | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Transport | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

| | | |
|--|--|---|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function | <input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence |
| | | <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge |
| | | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |

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January-07-14 1:12:42 PM

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Page 2

Item ID: 646.3718 Accept ***N900040100*** Setup Start ***NS1***
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Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--|---|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 130 *130* QC Quality Control | QC8- Inspect parts - second check Memo | 0.00 0.00 | | | | SO COEN | | | |
| 140 *140* Outsource4 Outsource process - Anodize | Outsource process-Anodize per QSI017 4.1.10.1 Memo Issue P/O to ATG : <u>22939</u> 1- Black Anodize as per Dwg 646.3700 2- PRIME AS PER DWG, SEE NOTE #2 Certification of Comformity is required | 0.00 0.00 | | | | | | | |
| 150 *150* Packaging Packaging | Receive & Inspect for Damage & Mat'l Certs Memo | 0.00 0.00 | | | | | | | |

CO 14/02/10 SO

14/2/20 (SO)

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

| | | |
|--|--|---|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div> |
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| Root Cause | Date | Step | Qty | Description of work order update or non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Design | | | | | | | | | |
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Handling/Pre | | | | | | | | | |
| Material | | | | | | | | | |
| Operator | | | | | | | | | |
| Offset/Setup | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Transport | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

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| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function | <input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence | <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |
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Page 3

January-07-14 1:12:42 PM

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 Required Date: 1/17/14 Req'd Qty: 20.00 *20* Customer:
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Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start *NR1*
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop *NR2*

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|--|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 160 | QC5- Inspect part completeness to step on W/O | 0.00 | | | | | | | |
| *160* | | | | | | | | | |
| QC | Memo | 0.00 | | | | 50 | | | 14-02-24 |
| Quality Control | | | | | | counted | | | |
| 190 | Identify as per dwg & Stock Location: <u>St 523A</u> | 0.00 | | | | | | | |
| *190* | | | | | | | | | |
| Packaging | Memo | 0.00 | | | | 50x | | | 14-2-24 |
| Packaging | ***IDENTIFY AS PER APICAL MPP-120 BY STAMPING THE P# AND REV*** | | | | | | | | |
| 200 | QC21- Final Inspection - Work Order Release | 0.00 | | | | | | | |
| *200* | | | | | | | | | |
| QC | Memo | 0.00 | | | | | | | 14-02-25 |
| Quality Control | | | | | | | | | 14-02-24 |

DAS
26
9-89

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

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| Root Cause | Date | Step | Qty | Description of work order update or non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
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| Design | | | | | | | | | |
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Handling/Pre | | | | | | | | | |
| Material | | | | | | | | | |
| Operator | | | | | | | | | |
| Offset/Setup | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Transport | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

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|--|--|---|--|

Picklist Print

January-07-14 1:12:41 PM

Work Order ID: 110639

Parent Item: 646.3718

Parent Item Name: Custom Washer

Start Date: 1/07/14

Required Date: 1/17/14

Start Qty: 20.00

Required Qty: 20.00

Comments: IPP REV:A 12.10.22 NEW ISSUE DD VERF:JLM

| Component Item ID/ Item Name | Replacement Item ID | Mfg/ Purch | Bin Item | Primary Location | Last Location | Route Seq ID | Unit of Measure | Qty on Hand | Qty per Kit | Total Qty | Qty Issued | Date Issued | Status |
|---------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|
|---------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|

M6061T6S.063
6061-T6 .063 Sheet

Purchased

No

110

sf

247.0000

0.0034

0.071578

14-1-29

Location

Loc Qty

Loc Code

MAT021

247

M124446

9

M126075

15

M127006

18

M127420

205

125431 x 0.281

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

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|--|--|--|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
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| Doc/Data <input type="checkbox"/> | | | | | | | | | |
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| Offset/Setup <input type="checkbox"/> | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | |
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| Transport <input type="checkbox"/> | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | |

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|--|--|---|--|

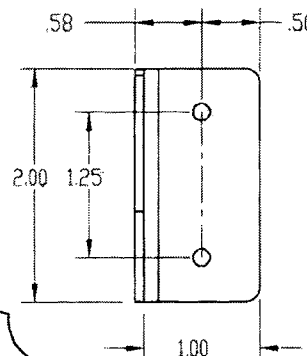
| | | | | | | |
|---|---|------------------------|-----------------------|-----------------|---|--|
| APICAL INDUSTRIES, INC. | ENGINEERING CHANGE NOTICE NO. 03702 | | | | SHEET 1 OF 2 | |
| | DWG NO. 646,3700 | REV: A | PREPARED BY B. PETERS | DATE: 11/15/12 | EFFECT ON DWG <input type="checkbox"/> INC. <input checked="" type="checkbox"/> UNINC. | |
| | DWG TITLE: SHEETMETAL | | | | | |
| | APPROVED BY: ENGR <i>[Signature]</i> | MFG <i>[Signature]</i> | QC <i>[Signature]</i> | EFF: NEXT ORDER | | |
| TRANSACTION CODES (TC) A-ADD C-CREATE R-REVISE D-DELETE | REASON: ADDED ALTERNATE MATERIAL AND REVISED REFERENCE DIMENSIONS | | | | EOR: D-12-010 | |

SHEET 1, ZONE A2 IS:

IS

△ PRIMARY MATERIAL: ALUMINUM 6061-T6 PER AMS-QQ-A-250/11
ALTERNATE MATERIAL: SS 17-4 PH PER AMS 5604

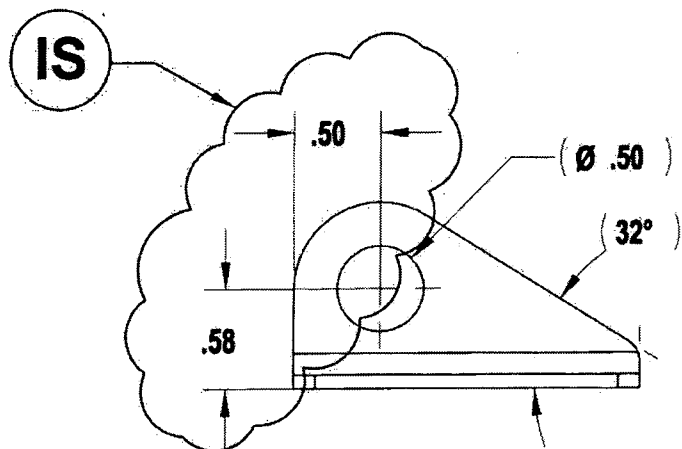
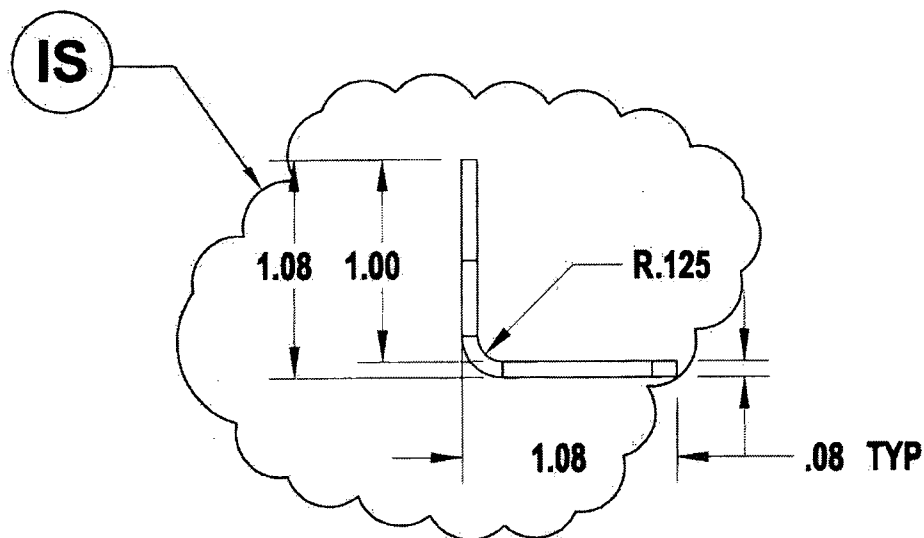
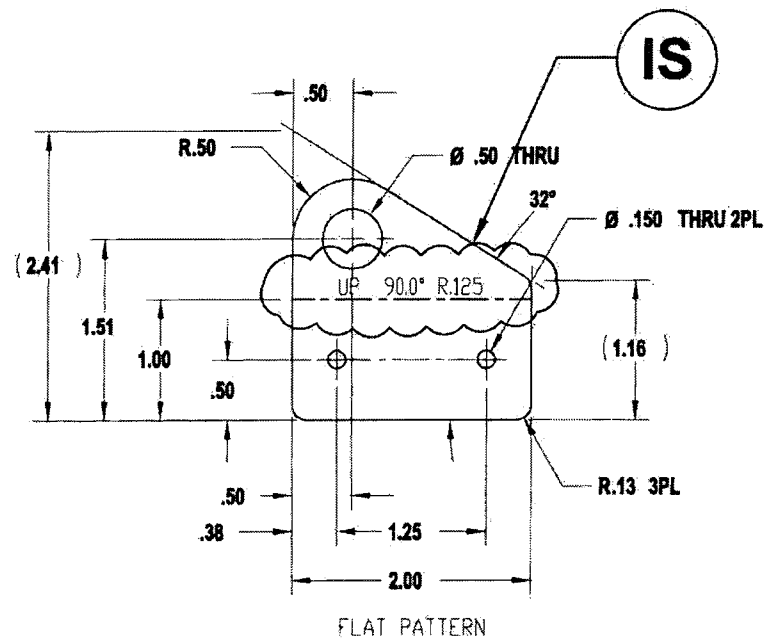
IS



110639
[Signature] 14/01/07

SHEET 7, ZONE B1 IS:

| F/N | TC | PART NUMBER | QTY | DESCRIPTION | MATERIAL | SPECIFICATION |
|---------------------|----|-------------|-----|--|---|--|
| DOCUMENTS EFFECTED: | | | | <input type="checkbox"/> RFMS <input type="checkbox"/> MDL <input type="checkbox"/> INSTALL INSTRU <input type="checkbox"/> ICA <input type="checkbox"/> BOM | CHANGE CATEGORY <input type="checkbox"/> MAJOR <input checked="" type="checkbox"/> MINOR | DER REVIEW REQUIRED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |

**SHEET 7, ZONE C4 IS:****SHEET 7, ZONE D1 IS:****SHEET 7, ZONE B7 IS:**

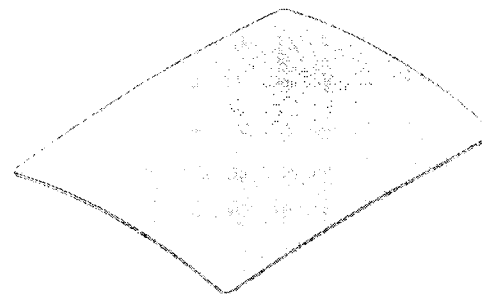
| F/N | TC | PART NUMBER | QTY | DESCRIPTION | MATERIAL/SPECIFICATION |
|-----|----|-------------|-----|-------------|------------------------|
|-----|----|-------------|-----|-------------|------------------------|

THE INFORMATION CONTAINED IN THIS DRAWING IS THE SOLE PROPERTY OF APICAL INDUSTRIES AND REPRODUCTION IN PART OR WHOLE WITHOUT THE WRITTEN PERMISSION OF APICAL INDUSTRIES IS PROHIBITED.

| REVISIONS | | | |
|-----------|-----------------------|----------|----------|
| REV. | DESCRIPTION | DATE | APPROVED |
| 1 | UNINCORPORATED ECN(S) | 03/02/02 | REV 2 |

NOTES:

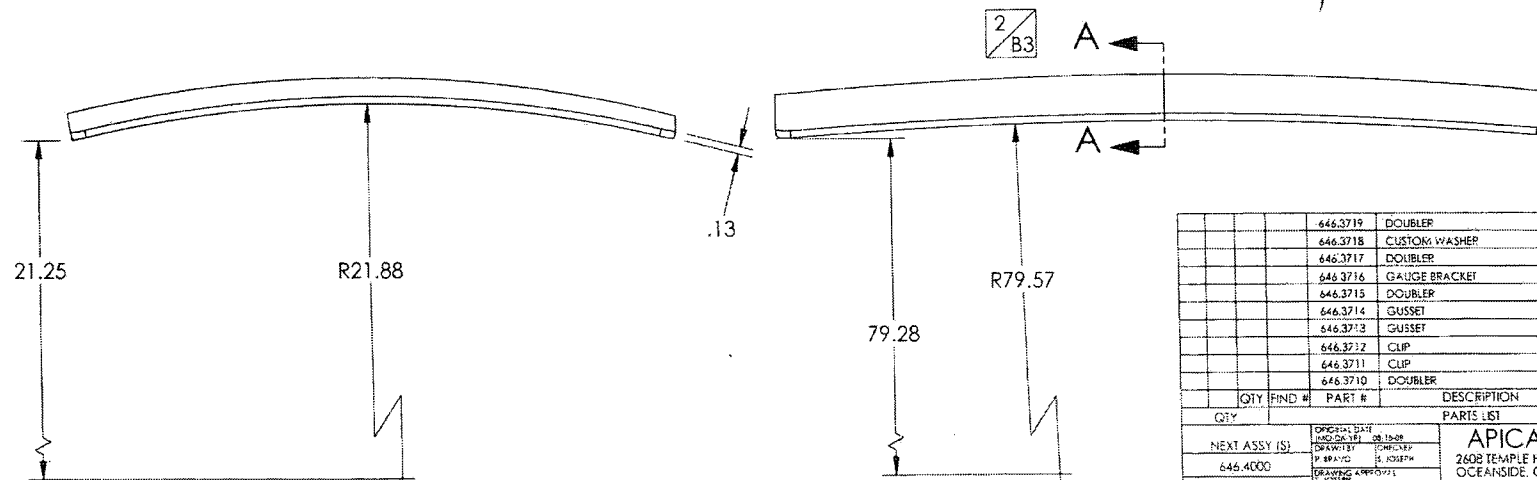
1. MATERIAL: ALUMINUM 6061-T6 PER AMS-QQ-A-250/11
2. FINISH: HARD ANODIZE IAW MIL-A-8625 TYPE III, CLASS 2, COLOR BLACK; CARDINAL 4860-50 PRETREATMENT PRIMER PRIME IAW MIL-P-23377J TYPE I CLASS N
3. MATERIAL: 17-4 PH AMS 5604, CONDITION H900
4. FINISH: PRIME IAW MIL-P-23377J TYPE I CLASS N
5. DEBURR AND BREAK ALL SHARP EDGES
6. IDENTIFY IAW MPP-120



646.3710

UNINCORPORATED ECN(s)

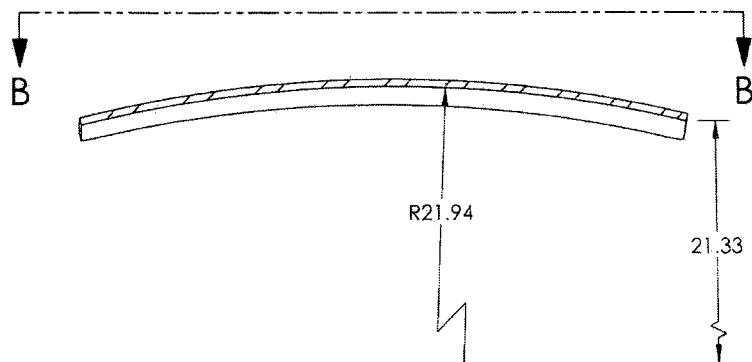
03702



| QTY | FIND # | PART # | DESCRIPTION | MATL | SPEC. |
|-----|--------|----------|---------------|------|-------|
| | | 646.3719 | DOUBLER | AL | AL |
| | | 646.3718 | CUSTOM WASHER | AL | AL |
| | | 646.3717 | DOUBLER | AL | AL |
| | | 646.3716 | GAUGE BRACKET | AL | AL |
| | | 646.3715 | DOUBLER | AL | AL |
| | | 646.3714 | GUSSET | AL | AL |
| | | 646.3713 | GUSSET | AL | AL |
| | | 646.3712 | CLIP | AL | AL |
| | | 646.3711 | CLIP | AL | AL |
| | | 646.3710 | DOUBLER | AL | AL |

| PARTS LIST | | APICAL INDUSTRIES | |
|---------------|--|---------------------------|--|
| NEXT ASSY IS: | | 2608 TEMPLE HEIGHTS DR. | |
| 646.4000 | | OCEANSIDE, CA. 92056-8512 | |
| | | (760) 724-5300 | |
| | | SHEETMETAL | |
| | | SHEET 1 OF 9 | |

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SECTION A-A



R395.138

R.13 4PL

13.51

10.49

10.54

SECTION B-B

ORIGINAL DATE
INC. BY: JTB 08-15-08
DRAWN BY: J. JOSEPH
P. BRAVO
DESIGNED BY: J. JOSEPH
CHECKED BY: J. JOSEPH
CONTRACT NO.

APICAL INDUSTRIES
2608 TEMPLE HEIGHTS DR.
OCEANSIDE, CA. 92056-3512 17601724-5300

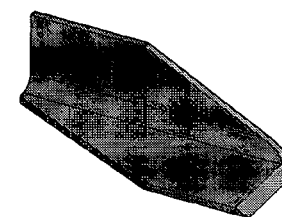
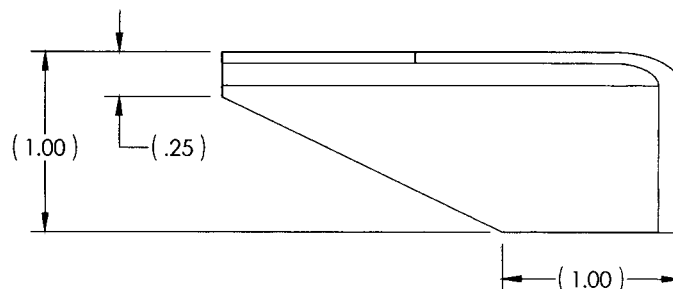
SHEETMETAL

UNLESS OTHERWISE SPECIFIED
DIMENSIONS ARE IN INCHES
TOLERANCES ARE:
1 PLACE DECIMALS ± .01
2 PLACE DECIMALS ± .005
3 PLACE DECIMALS ± .001
ANGLES ± .5°

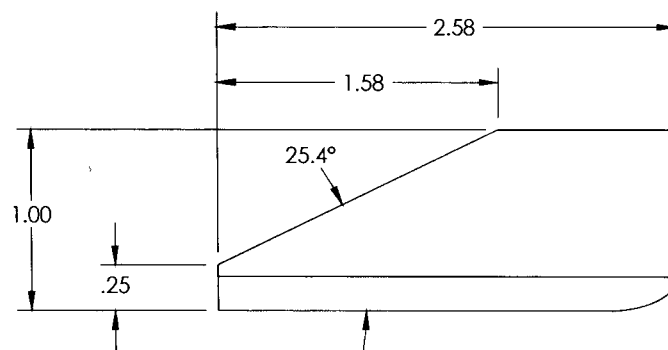
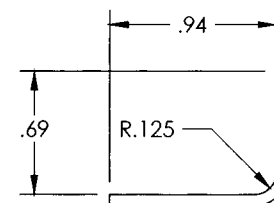
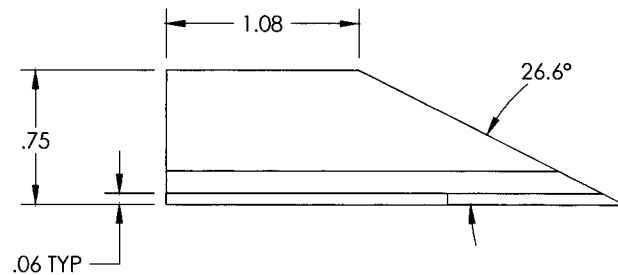
| | | | |
|-------------|-----------|----------|--------------|
| SHEET | DATE CODE | DWG. NO. | REV. |
| B | 07/02/06 | 646.3700 | A |
| SCALE: NONE | | | SHEET 2 OF 9 |

THE INFORMATION CONTAINED IN THIS DRAWING IS THE SOLE PROPERTY OF APICAL INDUSTRIES ANY REPRODUCTION IN PART OR WHOLE WITHOUT THE WRITTEN PERMISSION OF APICAL INDUSTRIES IS PROHIBITED.

| REVISIONS | | | |
|-----------|-------------|------|----------|
| REV. | DESCRIPTION | DATE | APPROVED |
| | | | |



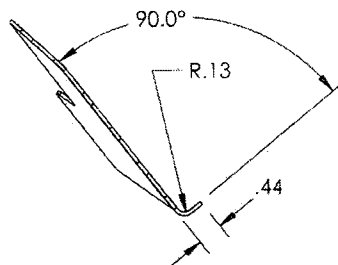
646.3711 SHOWN
646.3712 OPPOSITE



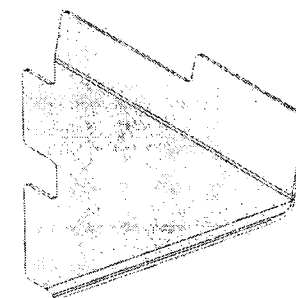
| | | | |
|---------------|---|---|--------------|
| NEXT ASSY (S) | ORIGINAL DATE 08-18-08 | APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300 SHEETMETAL | |
| | DRAWN BY P. BRAVO | | |
| | CHECKED BY S. JOSEPH | | |
| | DESKING APPROVAL S. JOSEPH | | |
| | CONTRACT NO. | SEE CAGE CODE B 07M26 | |
| | UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 3 PLACE DECIMALS ±.01 ANGLES ±.5° | | |
| | | DWG. NO. 646.3700 | REV. A |
| | | SCALE: NONE | SHEET 3 OF 9 |

THE INFORMATION CONTAINED IN THIS DRAWING IS THE SOLE PROPERTY OF APICAL INDUSTRIES. ANY REPRODUCTION IN PART OR WHOLE WITHOUT THE WRITTEN PERMISSION OF APICAL INDUSTRIES IS PROHIBITED.

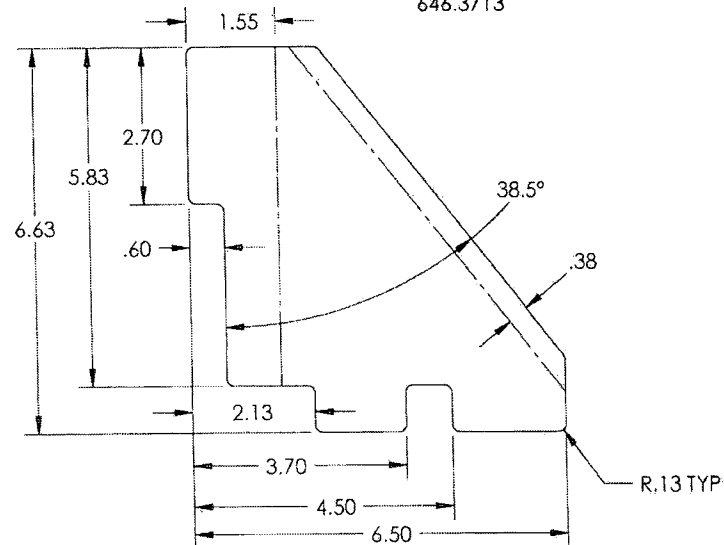
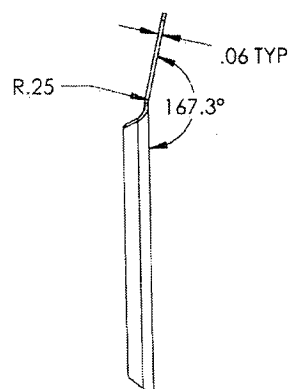
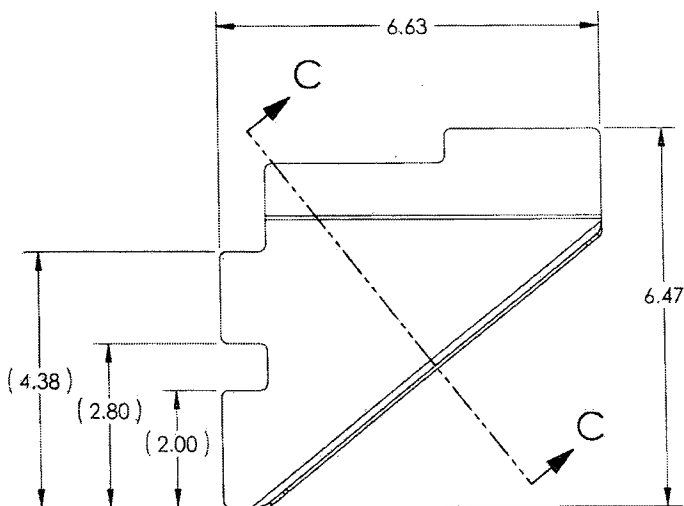
| REVISIONS | | |
|-----------|-------------|------|
| REV. | DESCRIPTION | DATE |
| | | |



SECTION C-C



646.3713

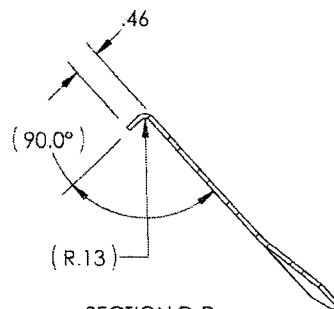
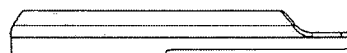


FLAT PATTERN

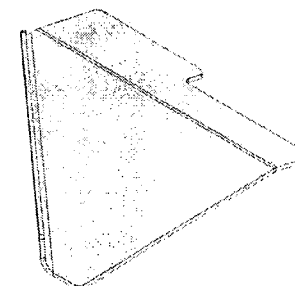
| | | | |
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| NEXT ASSY (S) | ORIGINAL DATE | 08-10-08 | APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300 SHEETMETAL |
| | DRAWN BY | W. J. JOSEPH | |
| | DESIGNED BY | W. J. JOSEPH | |
| | CHECKED BY | W. J. JOSEPH | |
| | UNLESS OTHERWISE SPECIFIED, DIMENSIONS ARE IN INCHES. TOLERANCES ARE .015" FOR ALL DIMENSIONS UNLESS OTHERWISE SPECIFIED. | | |
| | SCALE: 1"=1" | | |

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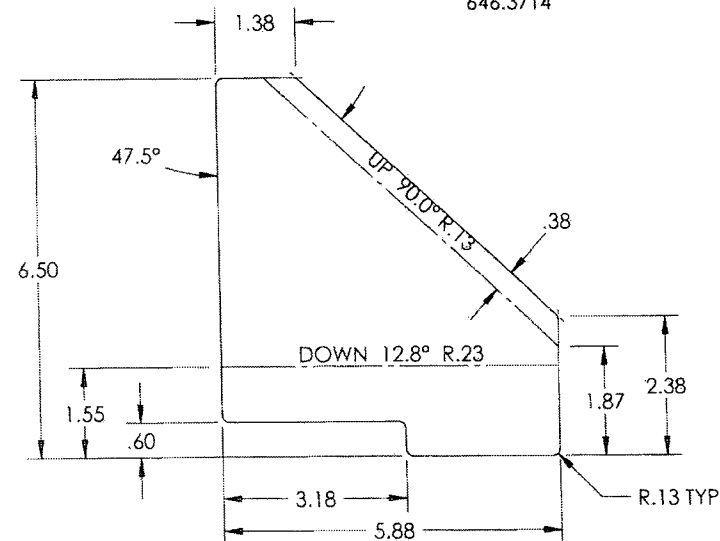
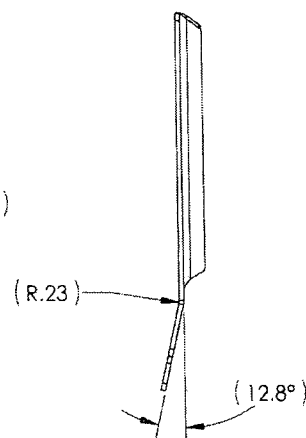
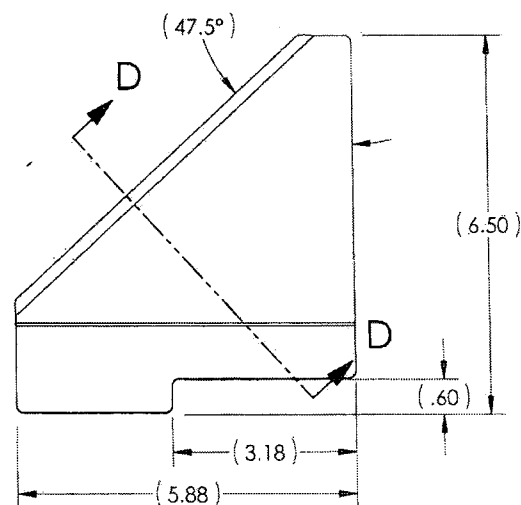
| REVISIONS | | |
|-----------|-------------|------|
| REV. | DESCRIPTION | DATE |
| | | |
| | | |
| | | |



SECTION D-D



646.3714

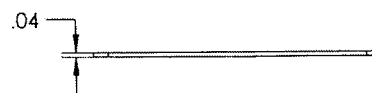
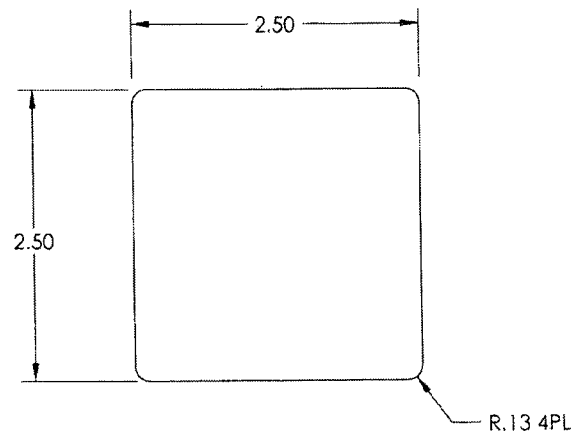


FLAT PATTERN

| | | | |
|---|--|--|--|
| ORIGINAL DATE 10/22/12 12:00 | | APICAL INDUSTRIES | |
| DRAWN BY P. BRAVO | | 2608 TEMPLE HEIGHTS DR. | |
| CHECKED BY J. JOSEPH | | OCEANSIDE, CA. 92056-3512 (760) 724-5300 | |
| DRAWING APPROVAL J. JOSEPH | | SHEETMETAL | |
| DATE 10/22/12 | | SHEET 5 OF 9 | |
| UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: FRACTIONS DECIMALS ± .01 ANGLES ± .5° | | SCALE NONE | |

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THE WRITTEN PERMISSION OF APICAL INDUSTRIES IS PROHIBITED.

| REVISIONS | | | |
|-----------|-------------|------|----------|
| REV. | DESCRIPTION | DATE | APPROVED |
| | | | |

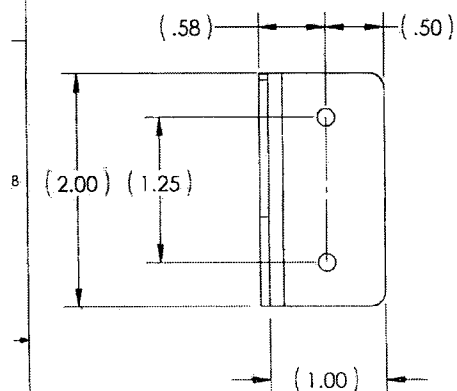


646.3715

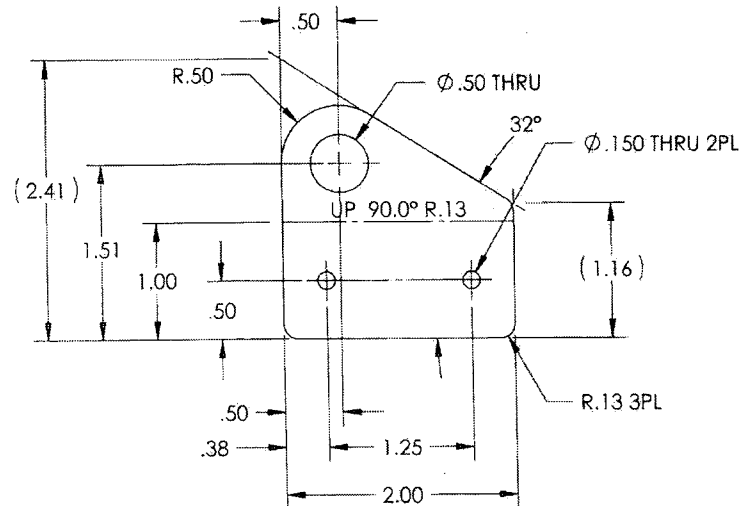
| | | | | | | | |
|--|--|---------------------------|--|---|--|--|--|
| NEXT ASSY (S) | | ORIGINAL DATE 08-18-08 | | APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300 SHEETMETAL | | | |
| DRAWN BY P. BRAY | | CHECKED J. JOSEPH | | | | | |
| DRAWING APPROVAL Y. JOSEPH | | DATE 08-18-08 | | | | | |
| CONTRACT NO. | | | | | | | |
| UNLESS OTHERWISE SPECIFIED (DIMENSIONS ARE IN INCHES) | | SHEET CODE B 07M26 | | DWG. NO. 646.3700 | | | |
| TOLERANCES ARE: 3 PLACE DECIMALS 1.00 ANGLES 1/2° | | SCALE: NONE | | REV A | | | |
| SHEET 4 OF 5 | | | | | | | |

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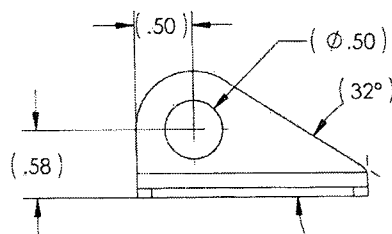
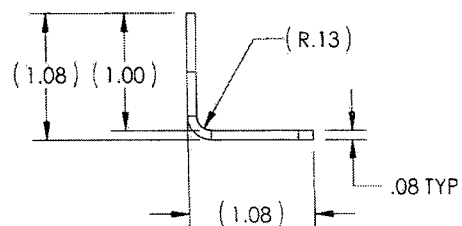
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| REV. | DESCRIPTION | DATE |
| | | |
| | | |



646.3716



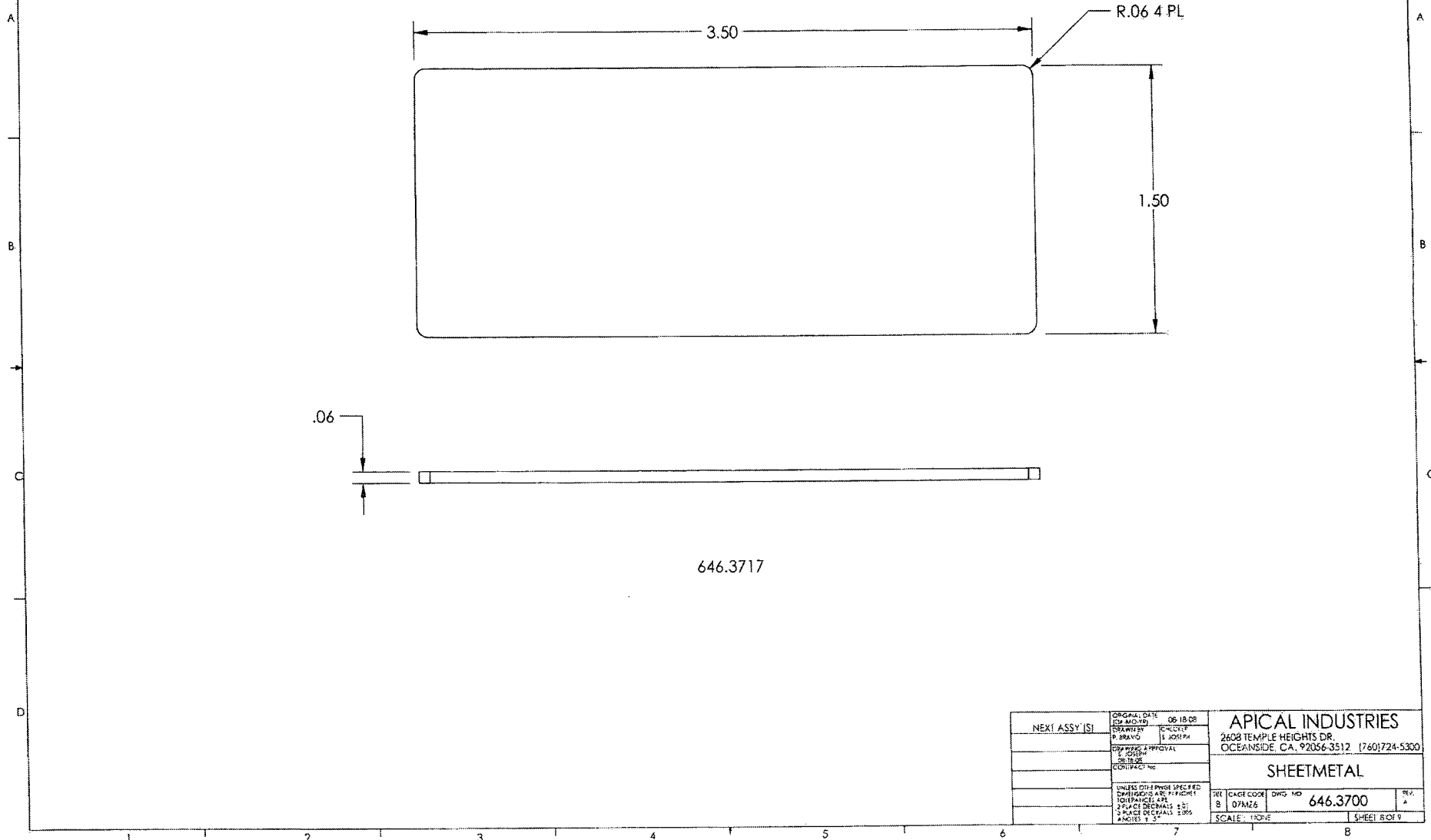
FLAT PATTERN



| | | | | |
|----------------------------|--|------------------------|--|-----|
| NEXT ASSY IS | | ORIGINAL DATE 08/15/06 | APICAL INDUSTRIES | |
| DRAWING BY | | DRAWN BY J. JOSEPH | 2608 TEMPLE HEIGHTS DR. | |
| CHECKED BY | | DATE 08/15/06 | OCEANSIDE, CA 92056-3512 (760)724-5300 | |
| CONTRACT NO. | | | SHEETMETAL | |
| UNLESS OTHERWISE SPECIFIED | | SEE SCALE CODE | DWG NO 646.3700 | REV |
| DIMENSIONS ARE IN INCHES | | B 57MM/6 | | |
| TOLERANCES ARE | | SCALE: NONE | SHEET 7 OF 9 | |
| 2-1/4 OF DIMENSIONS ± .01 | | | | |
| 3-1/4 OF DIMENSIONS ± .02 | | | | |
| ANGLES ± .5° | | | | |

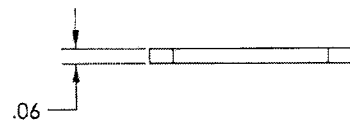
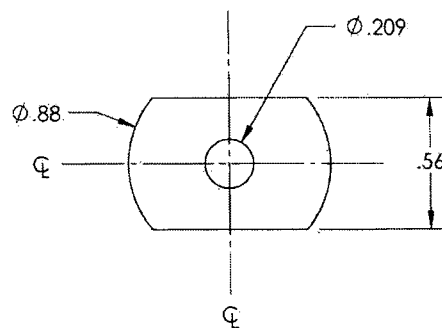
THE INFORMATION CONTAINED IN THIS DRAWING IS THE SOLE PROPERTY OF
APICAL INDUSTRIES AND REPRODUCTION IN PART OR WHOLE WITHOUT
THE WRITTEN PERMISSION OF APICAL INDUSTRIES IS PROHIBITED.

| REVISIONS | | | |
|-----------|-------------|------|----------|
| REV. | DESCRIPTION | DATE | APPROVED |
| | | | |

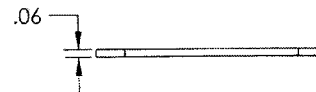
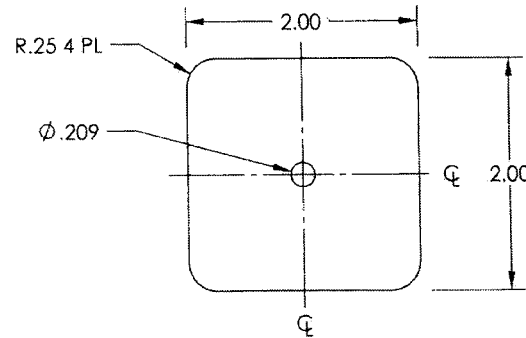


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| REV | DESCRIPTION | DATE | APPROVED |
|-----|-------------|------|----------|
| | | | |



646.3718



646.3719

| | | | | |
|--|-------------|----------|---|----------|
| NEXT ASSY IS | DESIGN DATE | 09-16-00 | APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 1/60/724-5300 | |
| | DESIGNED BY | J. KIRBY | | |
| | DRAWN BY | J. KIRBY | | |
| | APPROVED BY | J. KIRBY | | |
| CONTRACT NO. | | | SHEETMETAL | |
| UNLESS OTHERWISE SPECIFIED: DIMENSIONS ARE IN INCHES TOLERANCES ARE: 3 PLACE DECIMALS .001 2 PLACE DECIMALS .005 1 PLACE .015 | | | | |
| SCALE: NONE | | | | |
| MATERIAL CODE | | 07M26 | DWG. NO. | 646.3700 |
| SHEET | | 1 | SHEET 9 OF 9 | |



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID **PO22939**

Purchase Order Date 2/10/2014

PO Print Date 2/20/2014

Page Number 1 of 3

Order From :

VC-ATG001

Ship To : DART AEROSPACE LTD

A.T.G. INDUSTRIES INC.
731 INDUSTRIELLE ROAD
ROCKLAND, ON K4K 1T2
CANADA

1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

Contact Name

Vendor Phone 613-446-4544

Ship To Contact

Ship To Phone

Ship Via:

VENDOR'S TRUCK

Ship Acct:

Buyer

Chantal Lavoie

Customer POID

Customer Tax #

10127-2607

Terms

Net 30

Currency

CAD

FOB

FCA - (Free Carrier)

| Line Nbr | Reference Vendor Part Number | Description/ Mfg ID | Req Date/ Taxable | CD | Req Qty/ Unit of Measure | PO Unit Price | Extended Price |
|-------------------|------------------------------|---------------------|-------------------|----|--------------------------|---------------|----------------|
| Line Comments | | Promise Date | | | | | |
| Delivery Comments | | | | | | | |

| | | | | | | | |
|---|--------|------------------------|-----------|--|-------|--------|----------|
| 2 | 110639 | 646.3718 CUSTOM WASHER | 2/21/2014 | | 50.00 | \$3.95 | \$197.50 |
|---|--------|------------------------|-----------|--|-------|--------|----------|

Yes

2/21/2014

FINISH: HARD BLACK ANODIZE AS PER IAW MIL-A-8625 TYPE III, CLASS 2 / PRIME AS PER IAW MIL-P-23377J TYPE 1 CLASS N

Line Total: \$197.50

| | | | | | | | |
|---|--------|---------------|-----------|--|------|---------|---------|
| 3 | 111516 | 647.0210 RAIL | 2/21/2014 | | 4.00 | \$10.50 | \$42.00 |
|---|--------|---------------|-----------|--|------|---------|---------|

Yes

2/21/2014

FINISH: HARD BLACK ANODIZE AS PER IAW MIL-A-8625 TYPE III, CLASS 2 / PRIME AS PER IAW MIL-P-23377J TYPE 1 CLASS N

Line Total: \$42.00

| | | | | | | | |
|---|--------|---------------------|-----------|--|------|---------|---------|
| 4 | 106164 | 647.9317 RH BRACKET | 2/21/2014 | | 3.00 | \$18.00 | \$54.00 |
|---|--------|---------------------|-----------|--|------|---------|---------|

Yes

2/21/2014

FINISH: HARD BLACK ANODIZE AS PER IAW MIL-A-8625 TYPE III, CLASS 2 / PRIME AS PER IAW MIL-P-23377J TYPE 1 CLASS N

PO Instructions: Procurement Quality Clauses

A004 FAA-PMA /TSO

A005 RIGHT OF ENTRY

A007 FIRST ARTICLE INSPECTION (FAI) BY SELLER, (DOCUMENTATION MAINTAINED BY SUPPLIER)

A016 PERSONNEL QUALIFICATION

A024 PROCESS CERTIFICATIONS

A025 CERTIFICATE OF CONFORMANCE

A04

Note:



A.T.G. Industries Inc.
731, rue Industrielle Rd.
PLATING DEPARTMENT
Rockland, On K4K 1T2
Canada

Ph: (613) 446-4544

Fax: (613) 446-4556

Pack List

Number: 62893

Date: 20-Feb-14

To

DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ship To


DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ph: 613-632-5200

Fax: 613-632-1185

Ph: 613-632-5200

Fax: 613-632-1185

| Terms | | Ship Via | |
|---|--|----------|-----------|
| Quantity | Description | | |
| 1 lot | Part: ASST 50 PCS 646.3718 (3.95) 4 PCS 647.0210 (10.50) 5 PCS 647.9317 (18.00) 4 PCS 646.3811 (6.55) 6 PCS 647.9315 (14.35) HARD ANODIZE BLACK MIL-A-8625 TYPE III CLASS 2 PRIME MIL-P-23377J TYPE I CLASS N PRICE IS PER PIECE Job: 20140110 | Rev: | PO: 22939 |
| Certificate of Conformance | | | |
| A.T.G. Industries certifies that all items in this shipment are in conformance with all requirements, specifications and drawings referenced in the purchase order. | | | |
| ISO 9001 : 2008 REGISTERED ATG SALES-2010 TERMS APPLY | | | |
| DATE: 20/2/14 | | | |
| CERTIFIED SIGNATURE:  | | | |
| RECEIVER SIGNATURE: _____ | | | |